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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/017,640 |
| | Filing Date | December 14, 2001 |
| | First Named Inventor | William Matz |
| | Art Unit | 3629 |
| | Examiner Name | J. P. Ouellette |
| | Attorney Docket Number | BS01342 |

Total Number of Pages in This Submission: 15

ENCLOSURES

(Check all that apply)

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter Other Enclosure(s) (please identify below): Copy of Cited Reference |
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|-------------------|-----------------------------|-----------|--------|
| Name (Print/Type) | Bambi Faivre Walters | Reg. No.: | 45,197 |
| Signature | <i>Bambi Faivre Walters</i> | | |
| Date | January 26, 2005 | | |

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| Name (Print/Type) | Bambi Faivre Walters | Date | January 26, 2005 |
| Signature | <i>Bambi Faivre Walters</i> | | |

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
180.00**Complete if Known**

| | |
|----------------------|-------------------|
| Application Number | 10/017,640 |
| Filing Date | December 14, 2001 |
| First Named Inventor | William Matz |
| Examiner Name | J. P. Ouellette |
| Art Unit | 3629 |
| Attorney Docket No. | BS01342 |

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

| Fee (\$) | Small Entity Fee (\$) |
|----------|-----------------------|
| 50 | 25 |

Each independent claim over 3 (including Reissues)

200

Multiple dependent claims

360

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|
|--------------|--------------|----------|---------------|

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
|---------------|--------------|----------|---------------|

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
|--------------|--------------|--|----------|---------------|

- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): JDS - 37 CFR 1.97(b)(3)

\$180.00**SUBMITTED BY**

| | | | |
|-------------------|-----------------------------|---|------------------------|
| Signature | <i>Bambi Faivre Walters</i> | Registration No. 45,197 (Attorney/Agent) | Telephone 757-253-5729 |
| Name (Print/Type) | Bambi Faivre Walters | Date January 26, 2005 | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete If Known

Application Number 10/017,640

Filing Date December 14, 2001

First Named Inventor William Matz

Examiner Name J. P. Ouellette

Art Unit 3629

Attorney Docket No. BS01342

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200

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Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

- 20 or HP =

x

=

Indep. Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

- 3 or HP =

x

=

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Total Sheets

Extra Sheets

Number of each additional 50 or fraction thereof

Fee (\$)

Fee Paid (\$)

- 100 =

/ 50 =

(round up to a whole number) x

=

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Fees Paid (\$)

Other (e.g., late filing surcharge): IDS - 37 CFR 1.97(b)(3)

\$180.00

SUBMITTED BY

| | | | | | |
|-------------------|-----------------------------|-----------------------------------|--------|-----------|------------------|
| Signature | <i>Bambi Faltre Walters</i> | Registration No. (Attorney/Agent) | 45,197 | Telephone | 757-253-5729 |
| Name (Print/Type) | Bambi Faltre Walters | | | Date | January 28, 2005 |

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re application of: William Matz et al.

Group Art Unit: 3629

Application No.: 10/017,640

Examiner: J. P. Ouellette

Filed: December 14, 2001

Title: "System and Method for Identifying Desirable Subscribers"

JAN 26 2005

VIA FACSIMILE 703-872-9306

Attn: Examiner J. P. Ouellette

37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

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INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached Forms PTO 1449 (pp. 1-7).

This Information Disclosure Statement is being submitted after the mailing of a first Office Action in this application and therefore, the certification fee is believed to be required (37 CFR § 1.97b(3)).

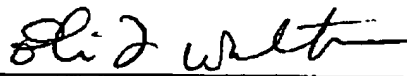
02/02/2005 BBONNER 00000025 10017640

01 FC:1006

100.00 OP

It is respectfully requested that the references listed on the attached forms be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom.

Respectfully submitted,



Bambi F. Walters

Attorney for Applicants

Registration No. 45,197

P. O. Box 5743

Williamsburg, VA 23188

Telephone: 757.253.5729

Date: 1/26/05

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PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 7

Complete if Known

| | |
|------------------------|-------------------|
| Application Number | 10/017,640 |
| Filing Date | December 14, 2001 |
| First Named Inventor | William Matz |
| Group Art Unit | 3629 |
| Examiner Name | J. P. Ouellette |
| Attorney Docket Number | BS01342 |

U.S. PATENT DOCUMENTS

| Examiner Initials * | Cite No. | U.S. Patent Document | | Name of Patentee or Applicant of Cited Document | Date of Publication of Cited Document MM-DD-YYYY | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|---------------------|----------|----------------------|--------------------------------------|---|--|---|
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PTO/SB/06A (C8-00)

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| | | | | Application Number | 10/017,640 |
| | | | | Filing Date | December 14, 2001 |
| | | | | First Named Inventor | William Matz |
| | | | | Group Art Unit | 3829 |
| | | | | Examiner Name | J. P. Ouellette |
| | | | | Attorney Docket Number | BS01342 |
| Sheet | 2 | Of | 7 | | |

| U.S. PATENT DOCUMENTS | | | | | | |
|------------------------|--------------------------|------------------------|--------------------------------------|--|--|---|
| Examiner Initials * | Cite No. ¹ | U.S. Patent Document | | Name of Patentee or Applicant of Cited Document | Date of Publication of Cited Document MM-DD-YYYY | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
| | | Number | Kind Code ² (if known) | | | |
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| FOREIGN PATENT DOCUMENTS | | | | | | | |
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| | | Offi ce ³ | Number ⁴ | Kind Code ⁵ (if known) | | | |
| | | | EP 1162840 A2 | | Wilson et al. | 12-2001 | |

| OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS | | | |
|---|--------------------------|--|----------------|
| Examiner Initials * | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
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PTO/SB/05A (08-00)

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| | | Attorney Docket Number | BS01342 |
| Sheet | 3 | of | 7 |

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| | | "How Wink Works," What is Wink: How wink works, www.wink.com/contents/howitworks.html , (11/16/01) p. 1 of 1. | |
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| Examiner Signature | | Date Considered | |
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

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**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if KnownSheet **4** of **7**

| | |
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| U. S. PATENT DOCUMENTS | | | | | |
|------------------------|----------|-----------------|--------------------------------|--|---|
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Sheet 5 of 7**Complete if Known**

| | |
|------------------------|-------------------|
| Application Number | 10/017,640 |
| Filing Date | December 14, 2001 |
| First Named Inventor | William Matz |
| Art Unit | 3629 |
| Examiner Name | J. P. Ouellette |
| Attorney Docket Number | BS01342 |

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**INFORMATION DISCLOSURE
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Complete if KnownSheet 6 of 7

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| Application Number | 10/017,640 |
| Filing Date | December 14, 2001 |
| First Named Inventor | William Matz |
| Art Unit | 3629 |
| Examiner Name | J. P. Ouellette |
| Attorney Docket Number | BS01342 |

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| INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i> | | Complete if Known | |
| | | Application Number | 09/496,825 |
| | | Filing Date | December 14, 2001 |
| | | First Named Inventor | William Matz |
| | | Art Unit | 3629 |
| | | Examiner Name | J. P. Ouellette |
| Sheet 7 | of 7 | Attorney Docket Number | BS01342 |

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